



D^CoE IN ACTION

MAY/JUNE 2008

IN THIS ISSUE:

- » From the Director
- » Helmet Capability to Prevent Concussion
- » DCoE Component Centers
- » DCoE Convenes Strategic Planning Summit
- » DCoE's Inaugural Global Video Teleconference
- » DCoE Research
- » Virtual Reality Iraq
- » DCoE Mission
- » DCoE Vision
- » In the Next Issue



**DEFENSE CENTERS
OF EXCELLENCE**

For Psychological Health
& Traumatic Brain Injury

<http://www.health.mil/dcoe.aspx>

From the Director

Welcome to the first edition of what will be a bi-monthly update on operations within the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE). By now, many of you have heard of DCoE and our vision to fulfill America's commitment to all who support and defend our Nation's freedom. With incredible help and collaboration, we have begun establishment of quality standards for clinical care; education and training; prevention; patient, family and community outreach; and program excellence. Our strides are positive and, with your continued support and teamwork, we will continue to generate positive irreversible momentum.

These are such dynamic and historic times . . . It is indeed an enormous privilege to serve alongside many dedicated professionals who want only what is right for our people who sacrifice so much in duty to country. DoD established this Center on 30 November 2007; working in tandem with the Department of Veterans Affairs (VA), we envision continued growth to encompass a global network of energy and expertise. We are integrating organizations and Defense programs as well as collaborating with other federal and civilian programs.

We are grateful for the committed teamwork of the Defense and Veterans Brain Injury Center (DVVIC), Center

for Deployment Psychology (CDP), Deployment Health Clinical Center (DHCC), Center for the Study of Traumatic Stress (CSTS) and the soon-to-be-built National Intrepid Center of Excellence.

Working together, we are seeking and developing the best processes to evaluate and treat Service members involved in events or exposed to actions resulting in traumatic brain injury, whether due to physical or psychological factors.

My intent with this newsletter is to keep you informed of DCoE progress, aimed at providing "news you can use" in support of our Warriors and Families. Please let me know how we can improve our outreach to meet your needs – we look forward to your candid and constructive ideas. Together, our success depends on transforming attitudes, beliefs and actions to reflect a resilience-based culture of trust, respect, and transparency.

I am honored to serve shoulder to shoulder with such dedicated professionals, challenged to stand and deliver at this moment of historic opportunity – let's get after it!

One Team~

Loree K. Sutton
BG, MC, USA
Director, DCoE

Helmet Capability to Prevent Concussion

The Defense Centers of Excellence (DCoE) for Psychological Health and Traumatic Brain Injury and the Defense and Veterans Brain Injury Center (A Component Center of the DCoE) held an information sharing activity on 28 March 2008 focused on pertinent helmet research, development and/or acquisition efforts being conducted across the Services. Below is a brief summary of the meeting:

- OIF/OEF brain injuries require examination of equipment to help prevent or attenuate concussion. DCoE will support examination of any good idea if it might prove to be better for our warriors than what they have currently. Such an idea, with impressive testing results (three separate tests) arrived at DCoE: Riddell helmets; tested was their padding and suspension. Testing was accomplished by the US Army Institute for Surgical Re-

search (ISR) with contract support from ARA.

- TRADOC, Army Test and Evaluation, USA Aeromedical Laboratory, Natick Laboratories (others) spoke about the strong and successful process in place to identify, test, procure and distribute new items of equipment. Many organizations and commands are involved in the process; some cross-service coordination exists. Greater integration of other laboratories and functional communities could enhance the holistic approach to personnel equipment and gear. Education of stake-holders and publics would increase awareness of the process, the



scope of testing, and the requirements involved in producing just one item.

- An acquisition has begun for a new helmet. Twelve industry vendors responded to a Request for Information (RFI), including Riddell. Next steps include selection of several prototypes for testing and evaluation. At this point it is possible to modify the specifications and requirements to incorporate the results from the ISR's Riddell padding and suspension testing. The RFI and pursuit of a new helmet responds to a requirement for SECDEF to report to Congress by September 2008 on such progress.
- Test results on the Riddell padding and suspension need further review and testing to determine whether they represent a viable change.

DCoE Component Centers

The DCoE integrates several DoD agencies as component centers. Over the next several issues of DCoE in Action, we will highlight each one. This month, we feature the **Defense and Veterans Brain Injury Center**.

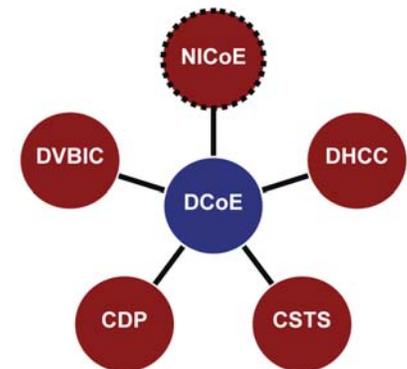
Defense and Veterans Brain Injury Center (DVBIC)

- Congressionally mandated and funded by the Department of Defense (DoD), in 1992, the Defense and Veterans Brain Injury Center reflects a unique collaborative effort between DoD and VA.
- DVBIC develops clinical standards, provides clinical care, and conducts research and education to define the best care for survivors of traumatic brain injury (TBI).
- Serves active duty military members, as well as the reserve component and National Guard, their dependents and veterans who have TBI.
- DVBIC accomplishes this through the best in clinical care, innovative clinical research initiatives, and educational programs at several military, civilian, and Department of Veterans Affairs (VA) sites across the country.
- Conducts surveillance of TBI for Service members in both Operation Iraqi Freedom and Operation Enduring Freedom (OIF/OEF); DVBIC is the office within DoD responsible for TBI surveillance for all Services
- Clinical care and research currently takes place at ten military sites representing all Services, four VA sites and two civilian treatment sites. A nationwide network of

14 TBI regional care coordinators and 14 TBI regional education coordinators enable care from acute injury to rehabilitation and transition to reintegration.

- As of 31 March 2008: 6,602 Service members with TBI have been seen within the DVBIC network.
- DVBIC research consists of clinical trials of rehabilitation modalities and medications as well as epidemiology studies and studies utilizing advanced neuro-imaging and diagnostic techniques. There are many federal and academic collaborative efforts which have led to initiatives involving proteomics, genomics, and nanotechnology
- DVBIC developed the MACE (Military Acute Concussion Evaluation), an in-theater tool to assist in the identification of TBI.
- A primary source for DoD TBI education for patients, caregivers, family members, and commanders, as well as healthcare providers
- In addition to providing pre-deployment and in-theater training to military medical personnel, they have provided TBI education at 14 bases and this past year trained over 700 DoD providers at the first tri-service DoD training course
- DVBIC continues its commitment to the effort to prevent, treat, and provide education on TBI for Service members. This commitment is in keeping with DoD's efforts to provide the world's best medical care for our Service members currently on active duty, National Guard and Reservists

recently injured in the line of duty, their dependents and retired military personnel



Contact Information for the DCoE and its Component Centers:

Defense Centers of Excellence for Psychological Health & Traumatic Brain Injury
703-696-9460; www.dcoe.health.mil

Defense & Veterans Brain Injury Center
1-800-870-9244; www.dvbic.org

Center for Deployment Psychology
301-295-4140; www.deploymentpsych.org

Deployment Health Clinical Center
202-782-6563; www.pdhealth.mil

Center for the Study of Traumatic Stress
301-295-2470;
www.centerforthestudyoftraumaticstress.org

DCoE Convenes Strategic Planning Summit

The Defense Centers of Excellence (DCoE) for Psychological Health and Traumatic Brain Injury held its Strategic Planning Summit on 25-28 February 2008 at the National Conference Center, in Lansdowne, VA. The mission of the Summit was to:

- Work in collaboration and coordination with key military healthcare leaders and experts;
- Define the responsibilities of DCoE's eight directorate;
- Establish a foundation on which to build in order to assist the military families and give them the best care and support that is critical to their recovery and treatment.

The Summit was well-attended with 160 attendees over the course of the four days including military healthcare representatives, clinicians, Department of Veterans Affairs (VA) and National Institute of Health (NIH) representatives, and military personnel and their families.

Great emphasis was placed on the importance of the mission of DCoE and in delivering the very best in care to our warriors

and their families. The Summit leaders, speakers, and distinguished guests included BG Loree K. Sutton, Special Assistant to the Assistant Secretary of Defense (Health Affairs) for PH and TBI and Director, DCoE, Ms. Ellen Embry, Deputy Assistant Secretary of Defense for Force Health Protection and Readiness (FHP&R), Dr. Lynda Davis, Deputy Assistant Secretary of the Navy for Military Personnel, COL Angel Lugo, Chief of Staff, DCoE, and Ted and Sara Wade to name a few.

Presentations were given to provide participants overviews of DCoE and DCoE metrics, the Defense and Veterans Brain Injury Center (DVBIC), the Center for Deployment Psychology (CDP), the Deployment Health Clinical Center (DHCC), and the National Intrepid Center of Excellence (NICoE). In addition, directorate leads and associated participants took on the challenge of reviewing and aligning recommendations from external commissions, creating mission statements, and outlining functions, skills/competencies, risks, issues, and next steps.

It was established that there would be

ongoing summits sponsored by the DCoE that would meet on a quarterly basis, rotate throughout the U.S., and continue the momentum of collaboration on PH & TBI issues.

DCoE's Inaugural Global Video Teleconference

On March 19, 2008, the DCoE held its first monthly global VTC, which was designed to stimulate and engage discussion within military medicine. Topics covered included psychological resilience, overview of the Defense and Veterans Brain Injury Center, overview of the Center for Deployment Psychology, Tele-health programs within the DoD, and a question and answer period. The next global VTCs will be 21 May, 25 June, and 23 July @ 1300. For further information, contact us at dcoe.outreach@tma.osd.mil

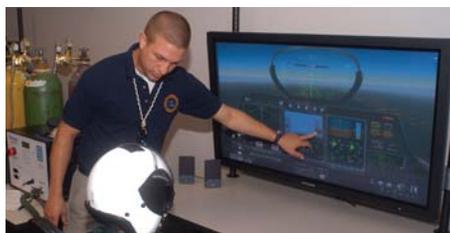
DCoE Research

The DCoE holds a strong commitment to fostering research on psychological health issues and traumatic brain injury. The primary aim is to facilitate applied and innovative research to address concerns relevant to America's warriors and their families. Recognizing that standardized definitions, metrics, and outcome measures facilitate and enhance the interpretation and meaningfulness of data between and across research studies, the DCoE emphasizes the need for interagency collaboration and instituting processes to

establish a comprehensive program for tracking diagnosis, patient care, and service delivery metrics. We are currently developing a centralized TBI registry, yielded by a collaborative effort across the Department of Defense, the Defense and Veterans Brain Injury Center, the Department of Veterans Affairs, and various technology experts. Another immediate goal is to establish a centralized institutional review board to help implement research in a timely manner, while still ensuring safe and ethical quality research.



Virtual Reality Iraq



Technology is revolutionizing the capabilities of military mental health in the 21st Century. One example currently being explored is a virtual reality Iraq, which uses a computer generated environment (e.g., desert landscapes, tactical convoys, dismounted urban patrols, rumbling ex-

plosions, simulated ambushes, etc.) to provide the user with a sense of being in Iraq.

- Simulating these experiences in Iraq is a form of exposure therapy, which involves repeated confrontation of past traumatic memories as a core part of the treatment approach.
- Multisensory virtual reality technologies are helping Service Members activate the painful memories of past events and emotionally engage in the therapy that may improve their day to day lives.
- With increased rates of posttraumatic stress disorder (PTSD) among veterans of

Operations Iraqi and Enduring Freedom, these new technologies offer an exciting and promising new technological application to a very old psychological consequence of war.

- The Center for Virtual Reality Behavioral Health in the Telepsychological Health and Technology Directorate of the DCoE has research underway to compare virtual reality exposure therapy to the traditional approach.
- Additional clinical trials are underway at the National Naval Medical Center, San Diego, Camp Pendleton, and Walter Reed Army Medical Center.

Defense Centers of Excellence
For Psychological Health
& Traumatic Brain Injury
1401 Wilson Blvd., Suite 400
Rosslyn, VA 22209

OFFICIAL BUSINESS

DCoE Vision

*Fulfilling
America's commitment
to all who
support and defend
our Nation's freedom*

DCoE Mission

To maximize opportunities
for Warriors and Families
to thrive through a
collaborative global network
promoting resilience,
recovery, and reintegration
for psychological health and
traumatic brain injury.

In the Next Issue

- Training: Defense and Veterans Brain Injury Center
- Training: Center for Deployment Psychology
- Neurocognitive Assessment Update
- Mental Health and Security Clearance Issues ("Question 21")
- Coming Soon: National Intrepid Center of Excellence
- Sesame Workshop Videos
- Congressional Testimony



BG Loree K. Sutton

Special Assistant to the
Assistant Secretary of
Defense (Health Affairs)
and Director,
DCoE for Psychological Health
& Traumatic Brain Injury

DCoE In Action is a publication by the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE).

We are committed to delivering the most relevant, useful and timely news on psychological health and traumatic brain injury and, as such, ask for your input and feedback on how to best accomplish this and improve our newsletter. Please send your input and feedback to our editor at dcoe.outreach@tma.osd.mil.

Our mailing address is 1401 Wilson Blvd., Suite 400, Arlington, VA 22209. Phone: (703) 696-9460.

Please come visit us at our current DCoE web page, which currently resides on the MHS (Military Health System) website and can be found at <http://www.health.mil/dcoe.aspx>.



*Views and opinions expressed
are not necessarily those
of the Department of Defense.*

